

02-06-01

PTO/SB/05 (08/00)

Approved for use through 10/31/2002. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. **061607-1490**First Inventor **Betts**Title **INTERLEAVED GENERALIZED CONVOLUTIONAL ENCODE**Express Mail Label No. **EL 763766217 US****APPLICATION ELEMENTS**

See MPEP Chapter 600 concerning utility patent application contents

ADDRESS TO:Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231 APPLICANT REQUESTS EARLY PUBLICATION UNDER 37 CFR 1.219 (additional fee)

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)

2. Applicant claims small entity status

3. Specification
(preferred arrangement set forth below)

[Total Pages

35

- Descriptive title of the invention
- Cross References to Related Applications
- Statement Regarding Fed Sponsored R&D
- Reference to sequence listing, a table, or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

4. Drawing(s) (35 USC 113) [Total Sheets

10

5. Oath or Declaration [Total Pages

3

a. Newly Executed (original or copy)

b. Copy from a prior application (37 CFR § 1.63(d))
(for continuation/divisional with Box 17 completed)

i. DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s)
named in the prior application,
see 37 CFR 1.63(d)(2) and 1.33(b)

6. Application Data Sheet See 37 CFR 1.76

Assignee **Paradyne Corporation**
Name and Address (if applicable) **8545 126th Avenue, North**
Largo, FL 33773

18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation Divisional Continuation-in-part (CIP)

of prior application No: /

Group / Art Unit:

Prior application information: Examiner _____
For CONTINUATION OR DIVISIONAL APPS only the entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. This incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts

18. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label

24504

(Insert Customer No or Attach bar code label here)



Correspondence address below

NAME	Lawrence E. Thompson Thomas, Kayden, Horstemeyer & Risley, L.L.P.		
ADDRESS	100 Galleria Parkway Suite 1750		
CITY	Atlanta	STATE	Georgia
COUNTRY	U.S.A.	TELEPHONE	770-933-9500
ZIP CODE	30339-5948		
FAX	770-951-0931		

Name (Print/Type)	Lawrence E. Thompson	Registration No. (Attorney/Agent)	41,346
Signature			

Burden Hour Statement: This form is estimated to take 0 2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Box Patent Application, Washington DC 20231.

PATENTS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: William L. Betts

For: INTERLEAVED GENERALIZED CONVOLUTIONAL ENCODER

CERTIFICATE OF EXPRESS MAIL

Assistant Commissioner for Patents

BOX: Patent Application

Washington, D.C. 20231

Sir:

Enclosed for filing in the above case are the following documents:

Return Postcard
Utility Patent Application Transmittal Page
Fee Transmittal Page in the amount of \$2,158.00
Utility Patent Application Consisting Of:
20 Pages of Specification
14 Pages of Claims
1 Pages of Abstract
10 Pages of Formal Drawings
Declaration For Patent Application (3 Pages)
Patent Application Data Entry Form

Further, the Commissioner is authorized to charge Deposit Account No. 16-0255 for any additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit Account No. 16-0255.

Respectfully submitted,

Lawrence E. Thompson



**THOMAS, KAYDEN, HORSTEMEYER
& RISLEY, L.L.P.**
100 Galleria Parkway, N.W.
Suite 1750
Atlanta, Georgia 30339-5948

Our Docket No: **061607-1490**

I hereby certify that all correspondences listed above are being deposited for delivery to the above addressee, with the United States Postal Service "**EXPRESS MAIL POST OFFICE TO ADDRESSEE**" service under 37 CFR §1.10 on the date indicated below:

The envelope has been given U.S. Postal Service "Express Mail Post Office To Addressee" Package # **EL 763766217 US**.

Date: 2-5-01



Marianne Boland
Marianne Boland

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FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 2,158.00)

Complete If Known	
Application Number	To Be Assigned
Filing Date	Herewith
First Named Inventor	Betts
Examiner Name	To Be Assigned
Group / Art Unit	To Be Assigned
Attorney Docket No.	061607-1490

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge to the following Deposit Account.

Deposit Account Number	16-0255
Deposit Account Name	Paradyne Corporation's

Charge all indicated fees and any additional fee required or credit any overpayment.

Charge any additional fee required and requested to credit any overpayment Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:
 Check Money Order Credit Card

FEE CALCULATION

1. BASIC FILING FEE

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	710	201	355	Utility filing fee	\$710
106	320	206	160	Design filing fee	\$
107	490	207	245	Plant filing fee	\$
108	710	208	355	Reissue filing fee	\$
114	150	214	75	Provisional filing fee	\$
SUBTOTAL (1)				(\$)	710

2. EXTRA CLAIM FEES

		Extra Claims	Fee from below	Fee Paid
Total Claims	76	-20** =	56	x 18.00 = 1,008
Independent Claims	8	-3** =	5	x 80.00 = 400
Multiple Dependent				270.00 =

**or number previously paid, if greater; For Reissue, see below

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent Claims in excess of 3
104	270	204	135	Multiple dependent claims in excess of 3
109	80	209	40	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)				(\$)1,408

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) 40.00

Complete (if applicable)

Reg Number 34,183

Deposit Account User ID

SUBMITTED BY

Typed or Printed Name

Scott A. Horstemeyer

Signature

Date

02/05/01